

FEC FORM 5**REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED**

To Be Used by Persons (Other than Political Committees)

1. (a) Name of Individual, Organization or Corporation Democratic Socialists of America, Inc.		
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 75 Maiden Lane Suite 702		
(c) City, State and ZIP Code New York NY 10038		3. FEC Identification Number C C90015413
2. Occupation and Name of Employer (for Individual Filers Only)		

4. TYPE OF REPORT (check appropriate boxes):

- (a) ☐ April 15 Quarterly Report
☐ July 15 Quarterly Report ☒ 24-Hour Report
☐ October 15 Quarterly Report ☐ 48-Hour Report
☐ January 31 Year-End Report

b) Is this Report an amendment? ☒ No ☐ Yes, it amends the report filed on

M	M	/	D	D	/	Y	Y	Y	Y	Y
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5. COVERING PERIOD:

FROM

M	M	/	D	D	/	Y	Y	Y	Y	Y
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THROUGH

M	M	/	D	D	/	Y	Y	Y	Y	Y
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6. TOTAL CONTRIBUTIONS.....

										0.00
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7. TOTAL INDEPENDENT EXPENDITURES

										1051.95
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Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE

DATE

[Electronically Filed]

Maria Svart

Maria Svart

01/29/2016

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. §437g.

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 2 OF 3
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee
Cheltenham Printing

Date of Public Distribution/Dissemination

MM / DD / YYYY
01 / 26 / 2016

Mailing Address 518 Ryers Avenue Building #2

Amount

City State Zip Code
Cheltenham PA 19012

59.63

Transaction ID : F57.6070

Purpose of Expenditure
promotional stickersCategory/
TypeOffice Sought: ☐ House State: NH
☐ Senate District: _____
☒ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
Bernard SandersCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought 1550.80Disbursement For: ☒ Primary ☐ General
2016 ☐ Other (specify) ▶Full Name (Last, First, Middle Initial) of Payee
David Duhalde

Date of Public Distribution/Dissemination

MM / DD / YYYY
01 / 29 / 2016Mailing Address 75 Maiden Lane
Suite 702

Amount

City State Zip Code
New York NY 10038

60.87

Transaction ID : F57.6073

Purpose of Expenditure
salary (w/ taxes & benefits) for work producing IEsCategory/
TypeOffice Sought: ☐ House State: NH
☐ Senate District: _____
☒ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
Bernard SandersCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought 1611.67Disbursement For: ☒ Primary ☐ General
2016 ☐ Other (specify) ▶Full Name (Last, First, Middle Initial) of Payee
Maria Svart

Date of Public Distribution/Dissemination

MM / DD / YYYY
01 / 29 / 2016Mailing Address 75 Maiden Lane
Suite 702

Amount

City State Zip Code
New York NY 10038

84.07

Transaction ID : F57.6075

Purpose of Expenditure
salary (w/ taxes & benefits) for work producing IEsCategory/
TypeOffice Sought: ☐ House State: NH
☐ Senate District: _____
☒ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
Bernard SandersCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought 1695.74Disbursement For: ☒ Primary ☐ General
2016 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶ 204.57

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 3 OF 3
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee

TM Design Corporation

Date of Public Distribution/Dissemination

MM / DD / YYYY
01 / 26 / 2016

Mailing Address 1916 Lyell Ave.

Amount

421.30

Transaction ID : F57.6071

Purpose of Expenditure
promotional tshirts (staff paid then was reimbursed)Category/
TypeOffice Sought: ☐ House State: NH
☐ Senate District: _____
☒ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
Bernard SandersCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought

1491.17

Disbursement For: ☒ Primary ☐ General
2016 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Ocala Wings

Date of Public Distribution/Dissemination

MM / DD / YYYY
01 / 21 / 2016

Mailing Address 3326 Wintergreen Dr.

Amount

426.08

Transaction ID : F57.6078

Purpose of Expenditure
additional calling fees for fundraising callsCategory/
TypeOffice Sought: ☐ House State: NH
☐ Senate District: _____
☒ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
Bernard SandersCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought

1069.87

Disbursement For: ☒ Primary ☐ General
2016 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Date of Public Distribution/Dissemination

MM / DD / YYYY

Mailing Address

Amount

City State Zip Code

Purpose of Expenditure

Category/
TypeOffice Sought: ☐ House State: _____
☐ Senate District: _____
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:

Check One: ☐ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office SoughtDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶ 847.38

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶ 1051.95
(carry total from last page forward to Line 7)